

03-10-06 PART B - FEE(S) TRANSMITTAL

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07278

7590

12/29/2005

DARBY & DARBY P.C.

P. O. BOX 5257

NEW YORK, NY 10150-5257

03/13/2006 MBELETE2 00000033 10706297

01 FC:1501

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Date 3-8-06

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(Date)

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/706,297

11/1/2003

Gunnar Back

02191/0200461-US0

5776

TITLE OF INVENTION: METHOD OF OPERATING HYDROKINETIC TORQUE CONVERTERS IN THE POWER TRAINS OF MOTOR VEHICLES AND TORQUE CONVERTER FOR THE PRACTICE OF THE METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1400

\$300

\$1700

03/29/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
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RODRIGUEZ, SAUL

3681

192-003300

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Darby & Darby

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

LuK Lamellen und Kupplungsbau Beteiligungs KG Buhl, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies

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☒ A check in the amount of the fee(s) is enclosed. \$1700.00

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-0100 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Edward J. Ellis

Date

3-8-06

Typed or printed name

Registration No. 40,389

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